



COMMON INTEREST COMMUNITY BOARD

Common Interest Community Manager Information Sheet

ALL APPLICATIONS, FORMS, AND REGULATIONS OF THE COMMON INTEREST COMMUNITY BOARD ARE AVAILABLE ON THE WEB AT http://www.dpor.virginia.gov/dporweb/cic_main.cfm.

All applicants must meet the current eligibility requirements at the time the completed application package is received at the board office. Completed application packages must include all required documentation, verifications, and fees. All forms must be legible. A firm will be notified within 30 days of the board's receipt of an initial application if the application is incomplete. Incomplete applications will only be kept in the Board office for 12 months from the date of receipt by the Board. Firms that fail to complete the process within 12 months of receipt of the application in the Board's office must submit a new application and fee, along with all required documentation. (18 VAC 48-50-20)

BOARD REGULATIONS AND STATUTES

Applicants for licensure are required to read and understand the *Common Interest Community Manager Regulations* and Chapter 23.3 of Title 54.1 of the *Code of Virginia* prior to applying for licensure.

FEES

Each application must be accompanied by the application fee of \$100, the \$25 recovery fund fee required pursuant to § 55-530.1.B of the *Code of Virginia*, and the annual assessment required by § 54.1-2349.A.1 of the *Code of Virginia*. The annual assessment is calculated by multiplying the gross receipts (as defined in 18 VAC 48-50-10 of the Board's regulations) by .0002. If the resulting amount is less than \$1,000, submit the actual calculated amount. If the amount is \$1,000 or more, submit \$1,000.

Supporting documentation, which may include copies of audits, tax returns, financial statements, or other documentation that provide the actual receipts collected, must be submitted with the application as proof of gross receipts for the preceding year. If the maximum amount of \$1,000 is submitted, this supporting documentation is not necessary. Firms that had no gross receipts during the previous calendar year should submit a note of explanation with the application (i.e., new company, did not offer management services the previous year, etc.). (18 VAC 48-50-60 and 18 VAC 48-50-80; §55-530.1.B; §54.1-2349.A.1)

QUESTION 1

All business entities that are required to register (including out-of-state businesses) and wish to conduct business in Virginia must register with the Virginia State Corporation Commission (including any trade/fictitious names) prior to applying for licensure with the Common Interest Community Board. The State Corporation Commission may be reached by dialing (800) 552-7945. Current registration with the State Corporation Commission will be verified by staff during the application review process; therefore, it is imperative that the company has a current registration under the name provided, if applicable. Provide the name of the firm as it is listed with the appropriate authority (i.e., State Corporation Commission or clerk of the court in the locality where the business will be conducted). Individuals will apply as a sole proprietor. (18 VAC 48-50-30.A)

QUESTION 2

Sole proprietors and other firms that are trading under fictitious names must attach a copy of the certificate filed with the clerk of the court in the locality where business will be conducted. Business entities that are required to register with the State Corporation Commission should ensure that the

trade or fictitious name has been properly registered with the State Corporation Commission. (18 VAC 48-50-30.A)

QUESTION 3

The Federal Employer Identification Number or, in the case of a sole proprietor, the Social Security Number or control number issued by the Virginia Department of Motor Vehicles must be provided on the application. State law requires that every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession, or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles. (§ 54.1-116.A)

QUESTIONS 4 AND 5

Please provide the applicant's street and mailing address. A post office box cannot be listed for the street address but is acceptable for the mailing address. Please note that this may not be the address used for correspondence (see Question 13). (18 VAC 48-50-30.B)

QUESTIONS 6 AND 7

Provide the e-mail and website addresses, if applicable, for the applicant.

QUESTION 8

No further explanation necessary.

QUESTION 9

In accordance with 18 VAC 48-50-30.B of the Board's regulations, the applicant must provide the address of the office from which the firm provides management services to Virginia common interest communities. This may or may not be the same address(es) provided in Questions 4 and 5. Only the address(es) of the main office that provide(s) management services to Virginia common interest communities need(s) to be provided. (18 VAC 48-50-30.B)

QUESTION 10

Please check the one type of business entity that applies to the applicant.

QUESTION 11

Check "yes" only if the applicant holds an active designation as an Accredited Association Management Company by the Community Associations Institute. If the applicant does not hold this designation, the applicant must attest that the firm has at least one full-time supervisory employee or officer involved in all aspects of the management services offered and provided by the firm, and a majority of the persons in a supervisory capacity must meet one of the following:

- ❖ Hold an active designation as a Professional Community Association Manager and have been actively engaged in providing management services for a period of 12 months immediately preceding application (proof of designation and a completed experience form must be submitted).
- ❖ Hold an active designation as a Certified Manager of Community Associations by the National Board of Certification for Community Association Managers and have five years of experience in providing management services, with at least 12 months of experience having been gained immediately preceding application (proof of designation and a completed experience form must be submitted).
- ❖ Hold an active designation as an Association Management Specialist and have five years of experience in providing management services, with at least 12 months of experience having been gained immediately preceding application (proof of designation and a completed experience form must be submitted).
- ❖ Has completed a training program and certifying examination approved by the Common Interest Community Board.

(18 VAC 48-50-30.H and 18 VAC 48-50-30.I)

QUESTION 12

Section 54.1-2346.D of the *Code of Virginia* requires that the applicant hold a blanket fidelity bond or employee dishonesty insurance policy. Please refer to Section 54.1-2346.D of the *Code of Virginia* for specific information regarding the coverage and amount. The bond or insurance policy must be in force no later than the effective date of the license and shall remain in effect through the date of expiration of the license (licenses expire one year from the last day of the month in which the license was issued) in order to ensure coverage throughout the period that the license is current and active. The Board recommends that the applicant requests the insurance carrier include a provision to notify the Board of cancellation or nonrenewal. Having that provision does not release the applicant from the responsibility of notifying the Board of cancellation, amendment, expiration, or any other change in the bond or insurance in accordance with 18 VAC 48-50-150.D. (18 VAC 48-50-30.D; § 54.1-2346.D)

QUESTION 13

Each applicant is required to name a responsible person who is an employee of the firm and serves as the individual ensuring compliance with Chapter 23.3 of Title 54.1 of the Code of Virginia and will be the point of contact for all mailings and correspondence from the Board or Department. This address may or may not be the same as those listed in Questions 4, 5, and 9. If the responsible person for the firm changes once the license is issued, the firm must submit a *Change of Responsible Person/Principal form* (form MGRCHG). It is imperative that the person and address listed here is current as all correspondence, including licenses, will be sent to that person. (18 VAC 48-50-10; 18 VAC 48-50-30.J)

QUESTION 14

No further explanation necessary.

QUESTIONS 15

While it is not required, the Board requests that the name and registration numbers of all common interest communities managed by the applicant be provided. Failure to provide this information will not result in delay of the application process.

QUESTION 16

The names, positions (i.e., Sole Proprietor, President, Secretary, Partner, etc.), and mailing address must be provided for all principals of the firm. If the firm is registered with the State Corporation Commission, the individual(s) listed on the application should match those filed with the State Corporation Commission.

QUESTION 17

No further explanation necessary.

QUESTIONS 18, 19, AND 20

This information must be provided for the applicant, responsible person, and all principals of the firm. An explanation and supporting documentation must be provided for all affirmative answers. (18 VAC 48-50-30.C, F, and G)

QUESTIONS 21 AND 22

The individual signing the application must be authorized to bind the applicant. The individual should thoroughly read, understand, and verify the accuracy of the attestations in Questions 21 and 22 prior to signing the application.

REQUIRED DOCUMENTATION

- Copy of blanket fidelity bond form or employee dishonesty insurance policy coverage form that shows, at a minimum, the provider of the bond/policy, the amount of the coverage, the expiration date of the bond/policy, and a summary of what is covered.
- Copy of trade or fictitious name certificate, if applicable.
- Documentation of gross receipts for the previous calendar year for calculating the assessment due

(unless the applicant is required to submit the maximum amount of \$1,000).

- Copy of documentation showing evidence of the active AACM designation indicated in Question 11, if applicable.
- Copy of documentation for affirmative responses to questions 18, 19, and/or 20 on this application.

Commonwealth of Virginia
 Department of Professional and Occupational Regulation
 Post Office Box 29570
 Richmond, Virginia 23242-0570
 (804) 367-8510
cic@dpdor.virginia.gov
www.dpor.virginia.gov



Common Interest Community Board
 COMMON INTEREST COMMUNITY MANAGER
 LICENSE APPLICATION

A check or money order payable to the *TREASURER OF VIRGINIA*, or a completed credit card insert must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

➔ The following fees are required for licensure:

Application Fee	<u>\$ 100.00</u>
Annual Assessment (§ 54.1-2349.A.1 of the Code of Virginia) Enter amount from Calculation Chart on page 5.	(+) \$ <u> </u>
Recovery Fund Fee (§ 55-530.1.B of the Code of Virginia)	(+) \$ <u>25.00</u>
TOTAL AMOUNT ENCLOSED	(=) \$ <u> </u>

COMMON INTEREST COMMUNITY MANAGER:

1. Business Entity/Sole Proprietor's Name _____
2. Trade or "Fictitious" Name _____
3. Federal Employer Identification Number

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 Sole Proprietor's Social Security No. *

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4. Street Address (PO Box not accepted) _____
 City, State, Zip Code _____
5. Mailing Address (PO Box accepted) _____
 City, State, Zip Code _____
6. E-mail Address _____
7. Website Address _____
8. Telephone & Facsimile Numbers () - () - () -
 Telephone Facsimile Pager/Cellular
9. Address of office from which the firm provides management services to Virginia common interest communities:
 - a. Street Address (PO Box not accepted) _____
 City, State, Zip Code _____
 - b. Mailing Address (PO Box accepted) _____
 City, State, Zip Code _____
10. Type of business entity (select only one)

Sole Proprietorship <input type="checkbox"/>	Limited Partnership <input type="checkbox"/>	Limited Liability Company <input type="checkbox"/>
General Partnership <input type="checkbox"/>	Association <input type="checkbox"/>	Corporation <input type="checkbox"/>

OFFICE USE ONLY	DATE	FEE	CLASS OF FEE	0 5 01	ISSUE DATE
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11. Does your company hold an active designation as an Accredited Association Management Company by the Community Associations Institute?
- No ☐ If no, by submitting this application, the applicant attests that at least one full-time supervisory employee or officer is involved in all aspects of the management services offered and provided by the firm, and a majority of persons in a supervisory capacity hold an approved designation and experience in accordance with 18 VAC 48-50-30.I.
- Yes ☐ If yes, proceed to question #13. **Proof of active AAMC designation must be submitted with your application.**
12. Applicants must **submit evidence** of a blanket fidelity bond or employee dishonesty insurance policy in accordance with § 54.1-2346(D) of the Code of Virginia. Proof of current bond or insurance policy must be submitted in order to obtain the license. Bond or insurance policy shall provide coverage in an amount equal to the lesser of \$2 million or the highest aggregate amount of the operating and reserve balances of all associations under the control of the common interest community manager during the prior fiscal year. The minimum coverage amount shall be \$10,000. The applicant certifies that the aggregate amount of the bond or insurance policy complies with the requirements of § 54.1-2346(D).
- a. Check one: ☐ Blanket fidelity bond ☐ Employee dishonesty insurance policy
- b. Bond/Policy Amount: \$ _____ Expiration Date: _____
13. In accordance with 18 VAC 48-50-30 of the Common Interest Community Manager regulations, each applicant shall designate a **responsible person** who is an employee of the firm. Complete the following for the individual selected to be the responsible person for this firm. **Please note that the responsible person ensures compliance with Chapter 23.3 of Title 54.1 of the Code of Virginia and will be the point-of-contact for all mailings and correspondence from the Board or Department.**
- a. Name _____
- b. Social Security No. *

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- c. Street Address (PO Box not accepted) _____
City, State, Zip Code _____
- d. Mailing Address (PO Box accepted) _____
City, State, Zip Code _____
14. The applicant has read, understands, and confirms that the applicant meets the requirements of § 54.1-2346 and Board Regulation 18 VAC 48-50-30.
- Yes ☐
- No ☐ **IF NO, THE APPLICATION CANNOT BE PROCESSED**
15. **OPTIONAL:**
Provide the name and registration number of all communities managed by the applicant. Please attach a separate sheet with the information below if additional space is needed.
- | Name of Common Interest Community | Registration Number of Community
<i>(The first 4 digits of the 10-digit number are provided)</i> |
|-----------------------------------|---|
| _____ | 0550 _____ |
| _____ | 0550 _____ |
| _____ | 0550 _____ |
16. List the firm's principals below (sole proprietor, partners of a general partnership, general partner of a limited partnership, officers/directors of an association, managers (or members if no managers) of a limited liability company, or officers of a corporation). Attach a separate sheet with the information below if additional space is needed.

Individual's Full Legal Name	Principal Position	Address

17. Does your business have a current or expired common interest community manager license, certification or registration in another state or jurisdiction?

No ☐
 Yes ☐ If yes, complete the following table.

Business Name	State/Jurisdiction	License, Certification or Registration No.	Expiration Date

18. Has your firm, responsible person, or any principals of the firm been subject to a disciplinary action imposed by any (including Virginia) local, state or national regulatory body?

No ☐
 Yes ☐ If yes, please provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

19. A. Has your firm, responsible person, or any principals of the firm ever been convicted in any jurisdiction of **any felony**? *Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.*

No ☐
 Yes ☐ If yes, please provide the information requested in #19.C.

B. Has your firm, responsible person, or any principals of the firm ever been convicted in any jurisdiction of **any misdemeanor** within the last three years? *Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.*

No ☐
 Yes ☐ If yes, please provide the information requested in #19.C.

Please read the following instructions carefully!

C. If you answered "yes" to either question #19.A. or #19.B., list the felony and/or misdemeanor conviction(s). Attach your original criminal history record and any other information you wish to have considered with this application (i.e., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation; etc.). If necessary, you may attach a separate sheet of paper.

*Original criminal history records may be obtained by contacting the state police in the jurisdiction in which you were convicted. Virginia residents **must** obtain a complete criminal history record from the Virginia State Police. You may obtain a request form from the Department of State Police, Central Criminal Records Exchange, Post Office Box 27472, Midlothian, Virginia 23261-7472 or by contacting your local State Police Division. **Certified copies of court records** may be obtained by writing to the Clerk of the Court in the jurisdiction in which you were convicted. The address is available from your local police department.*

20. During the past seven years, has the applicant, responsible person, or any principals of the firm had any outstanding, past-due debts or judgments; outstanding tax obligations; defaults on bonds; or pending or past bankruptcies?

No ☐
 Yes ☐ **IF YES, THE APPLICANT MUST PROVIDE ALL RELEVANT INFORMATION RELATED TO THESE MATTERS, AND SPECIFICALLY SHALL PROVIDE ALL RELEVANT FINANCIAL INFORMATION RELATED TO PROVIDING MANAGEMENT SERVICES AS DEFINED IN § 54.1-2345 OF THE CODE OF VIRGINIA. Failure to provide adequate documentation may result in a delay in the processing of your application.**

21. By signing this application, I hereby certify to the Board (i) that the applicant is in good standing and authorized to transact business in Virginia; (ii) that the applicant has established a code of conduct for the officers, directors, and persons employed by the applicant to protect against conflicts of interest; (iii) that the applicant provides all management services pursuant to written contracts with the associations to which such services are provided; (iv) that the applicant has

established a system of internal accounting controls to manage the risk of fraud or illegal acts; and (v) that an independent certified public accountant reviews or audits the financial statements of the applicant at least annually in accordance with standards established by the American Institute of Certified Public Accountants or by any successor standard-setting authorities.

22. I certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I certify that I will notify the Department if the firm, the responsible person, or any principals are subject to any disciplinary action; surrender a license in connection with a disciplinary action; fail to satisfy any judgments or restitution orders; or convicted of any felony or misdemeanor charges (in any jurisdiction) prior to the receipt of the requested license. I certify that I am authorized to bind the applicant herein. I certify that I have read, understand, and verified the accuracy of the foregoing statements and answers. I also certify that I understand, and have complied with, all the laws of Virginia under the provisions of Title 54.1, Chapter 23.3 of the *Code of Virginia* and all regulations of the *Common Interest Community Board*.

Signature

Date

Printed Name of Signatory

Title

Annual Assessment Calculation Chart

1.	Manager's gross receipts from common interest community management services during the preceding calendar year. Supporting documentation must accompany this application. This may include copies of audits, tax returns, financial statements, or other documentation that provide the actual receipts collected related to management services during the preceding calendar year.	\$
2.	0.02% of amount in Item 1 above. Multiply amount in Item 1 by 0.0002	\$
3.	If the amount in Item 2 is less than \$1,000, please insert amount in Line 2 on page 4.	
4.	If the amount in Item 2 is greater than \$1,000, please insert \$1,000 on page 4.	

* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.